



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 4248

<b>SERIAL NUMBER</b> 10/792,361	<b>FILING OR 371(c) DATE</b> 03/03/2004 <b>RULE</b>	<b>CLASS</b> 220	<b>GROUP ART UNIT</b> 3781	<b>ATTORNEY DOCKET NO.</b> TCO1-102US2
<b>APPLICANTS</b> Robert Joseph Panek JR., Huntley, IL;				
<b>** CONTINUING DATA *****</b> <i>de</i> This application is a CON of 09/845,976 04/30/2001 PAT 7,114,629				
<b>** FOREIGN APPLICATIONS *****</b> <i>de</i> <i>None.</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/25/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>S. Astell</i> Acknowledged <i>de</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 42
<b>INDEPENDENT CLAIMS</b> 7				
<b>ADDRESS</b> 23122				
<b>TITLE</b> Medical waste disposal system				
<b>FILING FEE RECEIVED</b> 1640	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	